

Independent Petroleum Association of New Mexico

34th Annual Meeting

2012 Registration Form

Registrant Information

| | |
|---------------------------------|--------------------------------------|
| Badge Name <input type="text"/> | State <input type="text"/> |
| Company <input type="text"/> | Zip/Postal Code <input type="text"/> |
| Address <input type="text"/> | Phone <input type="text"/> |
| City <input type="text"/> | E-mail <input type="text"/> |

Registration Type and Fees (Includes all functions except Golf Tournament)

| | |
|--|---------------------------------------|
| <input type="radio"/> Member \$375 | <input type="checkbox"/> Spouse \$175 |
| <input type="radio"/> Non-member \$475 | Spouse Full Name <input type="text"/> |

Social Event Tickets

Please indicate which social events you (and your spouse, if registered) plan to attend.

Note: registration fees cover the cost of all social events. This is for headcount and ticket purposes only. Do not request tickets for events you do not plan to attend.

| | Yourself | Spouse |
|--------------------------------|--------------------------|--------------------------|
| Welcome Reception (Aug. 8) | <input type="checkbox"/> | <input type="checkbox"/> |
| President's Reception (Aug. 9) | <input type="checkbox"/> | <input type="checkbox"/> |
| Buffet Breakfast (Aug. 10) | <input type="checkbox"/> | <input type="checkbox"/> |
| Membership Luncheon (Aug. 10) | <input type="checkbox"/> | <input type="checkbox"/> |
| Awards Dinner (Aug. 10) | <input type="checkbox"/> | <input type="checkbox"/> |

Golf Tournament

| | |
|-------------------------------------|---------------------------------------|
| Your Name <input type="text"/> | Your Handicap <input type="text"/> |
| Guest Golfer 1 <input type="text"/> | Guest 1 Handicap <input type="text"/> |
| Guest Golfer 2 <input type="text"/> | Guest 2 Handicap <input type="text"/> |
| Guest Golfer 3 <input type="text"/> | Guest 3 Handicap <input type="text"/> |
| | Total # <input type="text"/> |
| | x \$155 = <input type="text"/> |

Payment Information

| | |
|--------------------|----------------------|
| Registration Total | <input type="text"/> |
| Golf Total | <input type="text"/> |
| Total Fees | <input type="text"/> |

Check (Payable to "IPANM")
 Mail: IPANM Treasurer
 P.O. Box 1836
 Roswell, NM 88202-1836
 Fax: 575/622-8996

Credit Card
 Card Number
 Expiration Date (MM/YY)
 Cardholder Name